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Fill in this information to identify your case	:	
United States Bankruptcy Court for the: Northern District of Texas		
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is a amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Kieu	
	Write the name that is on your government-issued picture	First name	First name
	identification (for example, your driver's license or passport).	Middle name	Middle name
	Driver versus mietum identification	Leo	
	Bring your picture identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
2.	All other names you have used in the last 8 years	First name	First name
	names and any assumed, trade names and doing business as names.	Middle name Last name	Middle name Last name
	Do NOT list the name of any		Last Hallie
	separate legal entity such as a	Neocad USA	
	corporation, partnership, or LLC that is not filing this petition.	Business name (if applicable)	Business name (if applicable)
	that is not ming this potition.	Neocad USA, LLC	
		Business name (if applicable)	Business name (if applicable)
3.	Only the last 4 digits of your Social Security number or	xxx - xx - <u>9</u> <u>8</u> <u>0</u> <u>1</u>	xxx - xx
	federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx

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Deb	otor 1 Kieu	Leo	Case number (if known)
	First Name	Middle Name Last Name	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Your Employer Identification Number (EIN), if any.	3 5 - 2 7 8 5 8 2 6	EIN — — — — —
		EIN	
5.	Where you live		If Debtor 2 lives at a different address:
		610 Old Campbell Rd #116	
		Number Street	Number Street
		Richardson, TX 75080	
		City State ZIP Code	City State ZIP Code
		Dallas	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing <i>this</i> district to file for bankruptcy	Check one:	Check one:
	alculated molecular summaples,	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. § 1408)	I have another reason. Explain. (See 28 U.S.C. § 1408)
			

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Debtor 1		Kieu			Leo	Case number (if known)				
		First Name	Middle Na	ıme	Last Name					
Par	t 2: Tell th	e Court About You	ur Bankı	uptcy (Case					
				- 1 3						
7.		r of the Bankruptcy re choosing to file	Bankrup Cr Cr Cr		1 2					
8.	How you w	ill pay the fee	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, check, or money order. If your attorney is submitting your payment on your behalf, your attorney may a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Inc. to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By la judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% official poverty line that applies to your family size and you are unable to pay the fee in installments). choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official 103B) and file it with your petition.							
9.	Have you fi	led for bankruptcy	√ No.							
		ast 8 years?								
			☐ Yes.	District_		When	Case number			
						MM / DD	/ YYYY			
				District		When	Case number			
				•						
				District .		When	Case number			
						MM / DD	/ YYYY			
			ā							
10.	Are any ba	nkruptcy cases	√ No.							
		being filed by a	□yes	Debtor			Deletionship to you			
	case with y	o is not filing this	_ 100.	Debioi.			Relationship to you			
	•	artner, or by an		District		When	Case number, if known			
	affiliate?					MM / DD / Y	YYY			
				Debtor .			Relationship to you			
				District		When	Case number, if known			
						MM / DD / Y				
11.	Do you ren	t your residence?	✓ No. □ Yes.	Has you	our landlord obtained an evicti o. Go to line 12. s. Fill out <i>Initial Statement Ab</i>	oout an Eviction Judgme	ou? ent Against You (Form 101A) and file it			
				as	part of this bankruptcy petition	n.				

Deb	tor 1	Kieu			Leo		Case number (if known)			
		First Name	Middle N	ame	Last Name		(_		
Par	t 3: Report	About Any Busin	esses \	∕ou Own	as a Sole Proprietor					
12.		ele proprietor of	☑ No.	Go to Par	rt 4.					
	any full- or p business?	art-time	☐ Yes	. Name ar	nd location of business					
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a		Nan	Name of business, if any							
	corporation, p	partnership, or LLC.	Nun	nber	Street					
If you have more than one sole proprietorship, use a separate sheet and attach it to this		, use a separate								
	petition.		City			State	ZIP Code			
			Check the appropriate box to describe your business:							
			☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))							
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))							
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))							
			☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))							
				None of t	he above					
13.	11 of the Bar and are you	g under Chapter nkruptcy Code, a small business lebtor as defined § 1182(1)?	debtor of opera	d under Su or you are ations, cas	ubchapter V so that it can se choosing to proceed under	<i>t appropriate deadlin</i> Subchapter V, you m	u are a small business debtor or a debtor c. es. If you indicate that you are a small busin ust attach your most recent balance sheet, or if any of these documents do not exist, for	ness statement		
		n of small business	✓ No.	I am	not filing under Chapter 11.					
	debtor, see 1: 101(51D).	1 U.S.C. §	☐ No.		filing under Chapter 11, but truptcy Code.	l am NOT a small bu	siness debtor according to the definition in	the		
			☐ Yes		•		ebtor according to the definition in the der Subchapter V of Chapter 11.			
			☐ Yes		filing under Chapter 11, I am e, and I choose to proceed u		to the definition in § 1182(1) of the Bankrup f Chapter 11.	otcy		

Deb	tor 1	Kieu		Leo			Case number (if known)	
		First Name	Middle Name	Last Name				
Par	t 4: Repor	t if You Own or Ha	ave Any Ha	zardous Property or	Any Prope	erty That Needs I	mmediate Attention	
14.	-	n or have any	☑ No.					
	alleged to	mminent and identifiable nazard to public health or		What is the hazard?				
l S	hazard to p							
	safety? Or do you own any property that needs immediate attention?			If immediate attention is i	needed, why	is it needed?		
		e, do you own goods, or livestock						
	that must be	e fed, or a building urgent repairs?						
				Where is the property?				
					Number	Street		
					City		State	ZIP Code

Debtor 1	Kieu			Leo		Case numbe	r (if known)		
First Name		Mic	Idle Name	Last Name		Case numbe	(II KNOWN)		
Part 5: Ex	xplain Your Efforts to	Rec	eive a Briefing	About Credit Counseling					
have r	e court whether you eceived a briefing credit counseling.	Abo	out Debtor 1:		Abo	out Debtor 2 (Spo	use Only in a Joint Case):		
	w requires that you a a briefing about credit		ı must check one:		You	You must check one:			
counse bankru check c choices	eling before you file for ptcy. You must truthfully one of the following s. If you cannot do so, e not eligible to file.	$\mathbf{\Delta}$	✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.			counseling ager	fing from an approved credit ncy within the 180 days before I ptcy petition, and I received a npletion.		
If you f	ile anyway, the court			the certificate and the payment you developed with the agency.			the certificate and the payment you developed with the agency.		
lose wł paid, a	miss your case, you will natever filing fee you nd your creditors can collection activities		counseling ager	fing from an approved credit ncy within the 180 days before I ptcy petition, but I do not have a mpletion.		counseling ager	fing from an approved credit ncy within the 180 days before I ptcy petition, but I do not have a npletion.		
			•	Ifter you file this bankruptcy petition, copy of the certificate and payment			fter you file this bankruptcy petition, copy of the certificate and payment		
			from an approve obtain those ser made my reques	ked for credit counseling services ed agency, but was unable to rvices during the 7 days after I st, and exigent circumstances emporary waiver of the		from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.			
			requirement, atta what efforts you were unable to o	day temporary waiver of the ach a separate sheet explaining made to obtain the briefing, why you obtain it before you filed for what exigent circumstances ile this case.		requirement, atta what efforts you were unable to o	ay temporary waiver of the ach a separate sheet explaining made to obtain the briefing, why you btain it before you filed for what exigent circumstances le this case.		
			dissatisfied with	oe dismissed if the court is your reasons for not receiving a out filed for bankruptcy.		dissatisfied with	be dismissed if the court is your reasons for not receiving a ou filed for bankruptcy.		
			still receive a bri You must file a calong with a cop	tisfied with your reasons, you must defing within 30 days after you file. Sertificate from the approved agency by of the payment plan you by. If you do not do so, your case may		If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency along with a copy of the payment plan you developed, if any. If you do not do so, your case mabe dismissed.			
				f the 30-day deadline is granted only limited to a maximum of 15 days.	′		f the 30-day deadline is granted only limited to a maximum of 15 days.		
			I am not required counseling beca	d to receive a briefing about credit ause of:		I am not require counseling beca	d to receive a briefing about credit use of:		
			☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		
			Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		
			☐ Active duty	. I am currently on active military duty in a military combat zone.		☐ Active duty	. I am currently on active military duty in a military combat zone.		
				ou are not required to receive a redit counseling, you must file a			u are not required to receive a edit counseling, you must file a		

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

motion for waiver of credit counseling with the court.

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Deb	tor 1	Kieu		Leo		Case n	umber	(if known)
		First Name	Middle Name	Last Name				(
Dar	t 6: Answe	er These Question	s for Denor	ting Durnoses				
гаі	t o. Aliswe	er mese Question	зтог керог	ing ruiposes				
16.	16. What kind of debts do you have?		"incu			ner debts? Consumer debts are de for a personal, family, or househo		
			for a	110. CO 10 III 0 100.				
			16c. State	the type of debts you ov	we th	at are not consumer debts or busi	ness o	lebts.
17.	Are you fili	ng under Chapter 7?		I am not filing under Cha	aptei	7. Go to line 18.		
Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?						Do you estimate that after any exe		
18.	8. How many creditors do you estimate that you owe? 1-49 1,000-5,000 25,001-50,000 50,000-100,000 More than 100 100-199 10,001-25,000 200-999				000			
19.	19. How much do you estimate your assets to be worth?		\$50,0 \$100	50,000 001-\$100,000 0,001-\$500,000 0,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.	How much liabilities to	do you estimate you be?	\$50,0 \$100	50,000 001-\$100,000 0,001-\$500,000 0,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Par	t 7: Sign B	elow						
Fo	r you	If I have States C If no atto have ob I reques I unders bankrup and 357	chosen to file code. I understorney representatined and reat relief in accountant making a toy case can r	under Chapter 7, I am averaged the relief available units me and I did not pay out the notice required by rdance with the chapter of false statement, conceal	ware inder or ag 11 U of title	each chapter, and I choose to progree to pay someone who is not an .S.C. § 342(b). e 11, United States Code, specified property, or obtaining money or progress.	der Cha beceed attorn attorn d in thi	apter 7, 11,12, or 13 of title 11, United under Chapter 7. ey to help me fill out this document, I s petition.
		· -	eu Leo, Debto	or 1				
		E	xecuted on 03	8/25/2024 MM/ DD/ YYYY				

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Debtor 1	Kieu		Leo	Case number (if known)
	First Name	Middle Name	Last Name	Case Humber (II NIOWII)
represented	torney, if you are d by one ot represented by an ou do not need to file this	proceed under each chapter fo 11 U.S.C. § 342	Chapter 7, 11, 12, or 13 of r which the person is eligib (b) and, in a case in which	his petition, declare that I have informed the debtor(s) about eligibility to title 11, United States Code, and have explained the relief available under ble. I also certify that I have delivered to the debtor(s) the notice required by § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry with the petition is incorrect.
P. 9-1		X /s/ David		Date 03/25/2024
		Signature	of Attorney for Debtor	MM / DD / YYYY
		David Shu	ıster	
		Printed nar		
		Firm name	un, 1 220	
		860 Hebro	n Pkwy 303	
		Number	Street	
		Lewisville		TX 75057
		City		State ZIP Code
		Contact ph	one (972) 315-6222	Email address david@shusterlawfirm.com
		24037491		TX
		Bar numbe	r	State

	Lase 24-30812-	sgj7 DC	Docume		:ntered 03/ e 9 of 71	25/24 10:5 	1:59	Desc Main
Fill in this	information to identify	your case ar	nd this filing:					
Debtor 1	Kieu		Leo					
	First Name	Middle	e Name Last I	Name				
Debtor 2								
(Spouse, if	filing) First Name	Middle	e Name Last I	Name				
United Sta	ates Bankruptcy Court for	r the:	Northern	District of	Texas			
Case num	ber							Check if this is an amended filing
Official	Form 106A/B	· <u>-</u>						
Sched	dule A/B: P	ropert	V					12/15
		<u> </u>	<u>-</u>					ategory, list the asset i
□ N	ou own or have any leg No. Go to Part 2. 'es. Where is the propert		le interest in any resi	idence, building	ı, land, or simila	r property?		
1.1	1818 Warwick St Street address, if availa	able or other	What is the proper ✓ Single-family ho Duplex or multi-	ome	apply.	the amount of	any secur	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
	description	able, or other	Condominium o Manufactured or Land	r cooperative		Current value of entire property		Current value of the portion you own?
	Garland, TX 75044		Investment prop	perty		\$291	1,160.00	\$291,160.00
	City State	ZIP Code	- ☐ Timeshare ☐ Other				-	our ownership interest ancy by the entireties, or
	Dallas		- Who has an interes	st in the proper	ty? Check one.	a life estate), if		andy by the entireties, e.
	County		☑ Debtor 1 only			Homestead		
			Debtor 2 onlyDebtor 1 and DeAt least one of the	,	another	Check if thi (see instruct		munity property
			Other information property identifica	•		-		
	the dollar value of the have attached for Part						s →	\$291,160.00
Part 2:	Describe Your	Vehicles						

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

■ No

√ Yes

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Document Page 10 of 71 Debtor Leo, Kieu Case number (if known) _ Who has an interest in the property? Check one. 3.1 Toyota Make: Do not deduct secured claims or exemptions. Put ✓ Debtor 1 only the amount of any secured claims on Schedule D: Yaris Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Debtor 1 and Debtor 2 only 2017 Current value of the Current value of the Year: ■ At least one of the debtors and another entire property? portion you own? 125269 Approximate mileage: Check if this is community property (see \$6,700.00 \$6,700.00 instructions) Other information: Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories **√** No ☐ Yes Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only ■ Debtor 1 and Debtor 2 only Current value of the Current value of the Year: ■ At least one of the debtors and another entire property? portion you own? Other information: ☐ Check if this is community property (see instructions) Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages \$6,700.00 you have attached for Part 2. Write that number here Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. Household goods and furnishings 6. Examples: Major appliances, furniture, linens, china, kitchenware ■ No

Yes. Describe. Bedroom # 1 \$270.00 Portable Appliances 7. **Electronics** Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No Yes. Describe. \$300.00 Electronics

8.	Collectibles of value	
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	⊴ No	
	☐ Yes. Describe	
9.	Equipment for sports and hobbies	
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	☑ No	
	Yes. Describe	
10.	Firearms	
10.	Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	√ No	
	☐ Yes. Describe	
11.	Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	□ No	
	✓ Yes. Describe Clothing/Wearing Apparel	\$200.00
12.	Jewelry	
	Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	⊴ No	
	Yes. Describe	
13.	Non-farm animals	
	Examples: Dogs, cats, birds, horses	
	☑ No	
	Yes. Describe	
14.	Any other personal and household items you did not already list, including any health aids you did not list	
	∑Í No	
	☐ Yes. Give specific	
	information	
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$770.00
Ра	art 4: Describe Your Financial Assets	
	you own or have any legal or equitable Current value of the portion you own? Do not deduct secured claims or exemptions	

16.	Cash Examples: Money you	u have in your wallet, in your ho	ome, in a safe deposit box, and on hand when y	ou file your petition	
	√ No				
	_			Cash:	
17.	Deposits of money				
	Examples: Checking,		ounts; certificates of deposit; shares in credit un multiple accounts with the same institution, list		
	☐ No				
			Institution name:		
		17.1. Checking account:	Bank of America XX-9132		(\$190.65)
		17.2. Savings account:	Bank of America XX7116 Account Number: 7116		(\$16.00)
18.	•	, or publicly traded stocks			
		is, investment accounts with bro	okerage firms, money market accounts		
	☑ No				
	☐ Yes	Institution or issuer name:			
19.	LLC, partnership, and		orated and unincorporated businesses, inclu	iding an interest in an	
	☐ No				
	✓ Yes. Give specific				
	information about them	Name of entity:		% of ownership:	
	uieiii	·		·	¢4.00
		Dallas Dental Labratory, Ir	10	100.00%	\$1.00
		Neocad USA, LLC		100.00%	\$1.00
20.	Government and cor	norate honds and other nego	tiable and non-negotiable instruments		
20.	Negotiable instruments	s include personal checks, cash	niers' checks, promissory notes, and money ordenser to someone by signing or delivering them.	ers.	
	√ No				
	Yes. Give specific				
	information about them	Issuer name:			
		-			

21.	Retirement or pension			
		IRA, ERISA, Keogh, 40	1(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
	√ No			
	Yes. List each account separately.	Type of account:	Institution name:	
		401(k) or similar plan:		
		Pension plan:		
		IRA:		
		Retirement account:		
		Keogh:		
		Additional account:		
		Additional account:		
22.	Security deposits and	nrenayments		
			de so that you may continue service or use from a company	
			rent, public utilities (electric, gas, water), telecommunications companies, or	
	✓ No			
	☐ Yes	In	stitution name or individual:	
	_	Electric:		
		Gas:		
		Heating oil:		
		Security deposit on ren	otal unit:	
		Prepaid rent:		
		Telephone:		
		Water:		
		Rented furniture:		
		Other:		
23.	Annuities (A contract for	or a periodic payment of	money to you, either for life or for a number of years)	
	✓ No			
		Issuer name and descr	iption:	
		-		

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24.	Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).					
	√ No					
	Yes Institution name a	and description. Separately file the records of any interests.1	11 U.S.C. § 521(c):			
25.	Trusts, equitable or future interests in property for your benefit	property (other than anything listed in line 1), and rights	or powers exercisable			
	√ No					
	Yes. Give specific information about them					
26.	Patents, copyrights, trademarks, trade	· · · · · · · · · · · · · · · · · · ·				
		ites, proceeds from royalties and licensing agreements				
	√ No					
	Yes. Give specific information about them					
27.	Licenses, franchises, and other general Examples: Building permits, exclusive licenses.	I intangibles enses, cooperative association holdings, liquor licenses, pro	ofessional licenses			
	√ No					
	Yes. Give specific					
	information about them					
Mone	ey or property owed to you?			Current value of the		
				portion you own? Do not deduct secured claims or exemptions.		
28.	Tax refunds owed to you					
	☑ No					
	Yes. Give specific information about		Federal:			
	them, including whether you already filed the returns and					
	the tax years		State:			
			Local:			
29.	Family support					
		,, spousal support, child support, maintenance, divorce settl	ement, property			
	√ No					
	Yes. Give specific information		Alimony:			
			Maintenance:	_		
			Support:	-		
			Divorce settlement:			
			Property settlement:			

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30.	Other amounts someone owes you Examples: Unpaid wages, disability insu	rance payments, disability bene	fits, sick pay, vacation pay, workers' compensation,	
		aid loans you made to someone		
	☑ No			
	☐ Yes. Give specific information]
31.	Interests in insurance policies			-
01.	·	ance: health savings account (HS	SA); credit, homeowner's, or renter's insurance	
	√ No	3	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Yes. Name the insurance company			
	of each policy and list its value.	Company name:	Beneficiary:	Surrender or refund value:
32.	Any interest in property that is due you			
	If you are the beneficiary of a living trust, property because someone has died.	expect proceeds from a life insu	rance policy, or are currently entitled to receive	
	☑ No			_
	☐ Yes. Give specific information			
33.	Claims against third parties, whether of Examples: Accidents, employment disputed in the control of the contro	•	• •	
	☑ No			
	Yes. Describe each claim			1
	_			
34.	Other contingent and unliquidated claiclaims	ims of every nature, including	counterclaims of the debtor and rights to set of	1
	☑ No			
	Yes. Describe each claim]
35.	Any financial assets you did not alread	dy liet		•
55.		ay iist		
	☑ No			1
	Yes. Give specific information			
				J
36.	Add the dollar value of all of your entri for Part 4. Write that number here			(\$204.65)
Pa	rt 5: Describe Any Business	s-Related Property You	Own or Have an Interest In. List any	real estate in Part 1.
37.	Do you own or have any legal or equit	able interest in any business-r	related property?	
	✓ No. Go to Part 6.			
	Yes. Go to line 38.			

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				Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or co	mmissions you already earned		
	₫ No			
	Yes. Describe			
39.	Office equipment, furnishi	ngs, and supplies		
	Examples: Business-relate electronic device	d computers, software, modems, printers, copiers, fax machines, rugs, telepes	phones, desks, chairs,	
	√ No			
	Yes. Describe			
40.	Machinery, fixtures, equip	ment, supplies you use in business, and tools of your trade		
	₫ No			
	Yes. Describe			
41.	Inventory			
	☑ No			
	Yes. Describe			
42.	Interests in partnerships of	r joint ventures		
	√ No			
	Yes. Describe			
	Nai	ne of entity:	of ownership:	
	_			
	_			
43.	Customer lists, mailing lis	ts, or other compilations		
	√ No			
	Yes. Do your lists inclu	de personally identifiable information (as defined in 11 U.S.C. § 101(41A	4))?	
	☐ No			
	Yes. Describe.			

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Case number (if known)

Debtor Leo, Kieu

Any business-related property you did not already list **√** No ☐ Yes. Give specific information Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$0.00 for Part 5. Write that number here Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. Part 6: If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? ✓ No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish **√** No ☐ Yes 48. Crops—either growing or harvested **√** No ☐ Yes. Give specific information. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade **√** No ☐ Yes Farm and fishing supplies, chemicals, and feed **√** No ☐ Yes 51. Any farm- and commercial fishing-related property you did not already list **√** No ☐ Yes. Give specific information.

52.	Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	\$0.00
Pa	rt 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53.	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership	
	✓ No ☐ Yes. Give specific information	
54.	Add the dollar value of all of your entries from Part 7. Write that number here	\$0.00
Pa	rt 8: List the Totals of Each Part of this Form	
55.	Part 1: Total real estate, line 2	\$291,160.00
56.	Part 2: Total vehicles, line 5 \$6,700.00	
57.	Part 3: Total personal and household items, line 15 \$770.00	
58.	Part 4: Total financial assets, line 36 (\$204.65)	
59.	Part 5: Total business-related property, line 45 \$0.00	
60.	Part 6: Total farm- and fishing-related property, line 52 \$0.00	
61.	Part 7: Total other property not listed, line 54 + \$0.00	
62.	Total personal property. Add lines 56 through 61	+\$7,265.35
63.	Total of all property on Schedule A/B. Add line 55 + line 62.	\$298,425.35

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Fill in this information to identify your case:					
Debtor 1	Kieu		Leo		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:			Northern District of Texas		
Case number					☐ Check if thi
(if known)					amended fi

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. 1. □ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☑ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)							
 For any property you list on Schedule A/B th Brief description of the property and line on 	at you claim as exempt, fil Current value of the	I in the information below. Amount of the exemption you claim	Specific laws that allow exemption				
Schedule A/B that lists this property	portion you own	Amount of the exemption you claim	opecine laws that allow exemption				
	Copy the value from Schedule A/B	Check only one box for each exemption.					
Brief description:	\$	√ \$0.00	11 U.S.C. § 522(d)(1)				
1818 Warwick St Garland, TX 75044 Line from Schedule A/B: 1.1	\$291,160.00	100% of fair market value, up to any applicable statutory limit					
		√ \$0.00	11 U.S.C. § 522(d)(5)				
		100% of fair market value, up to any applicable statutory limit					
Brief description: 2017 Toyota Yaris	\$6,700.00	√ \$4,450.00	11 U.S.C. § 522(d)(2)				
Line from Schedule A/B: 3.1		☐ 100% of fair market value, up to any applicable statutory limit					
		√ \$2,250.00	11 U.S.C. § 522(d)(5)				
		100% of fair market value, up to any applicable statutory limit					

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Debtor 1	Kieu		Leo		_ Case number (if kno	own)	
	First Name	Middle Name	Last Name				
Part 2:	Part 2: Additional Page						
3. Are y	ou claiming a homestead e	xemption of more t	han \$189,050?				
` - '	ect to adjustment on 4/01/25	and every 3 years	after that for cases filed	on or after the	e date of adjustment.)		
_	☑ No						
	☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?						
L	No						
	☐ Yes						

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Debtor 1 Kieu Leo Case number (if known) ____ First Name Middle Name Last Name Part 2: Additional Page Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Brief description: $\sqrt{}$ C.C.P. § 703.140(b)(3) \$250.00 Bedroom #1 ☐ 100% of fair market value, up I ine from to any applicable statutory limit Schedule A/B: 11 U.S.C. § 522(d)(3) \$250.00 ☐ 100% of fair market value, up to any applicable statutory limit Brief description: \$20.00 C.C.P. § 703.140(b)(3) \$20.00 Portable Appliances ☐ 100% of fair market value, up to any applicable statutory limit I ine from Schedule A/B: $\mathbf{\Lambda}$ \$20.00 11 U.S.C. § 522(d)(3) 100% of fair market value, up to any applicable statutory limit Brief description: $\sqrt{}$ \$300.00 11 U.S.C. § 522(d)(3) \$300.00 Electronics 100% of fair market value, up Line from to any applicable statutory limit Schedule A/B: Brief description: $\mathbf{\Lambda}$ 11 U.S.C. § 522(d)(3) Clothing/Wearing Apparel \$200.00 ☐ 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: Brief description: $\mathbf{\Lambda}$ \$0.00 11 U.S.C. § 522(d)(5) (\$190.65)Bank of America XX-9132 100% of fair market value, up Checking account to any applicable statutory limit I ine from Schedule A/B: Brief description: \$0.00 11 U.S.C. § 522(d)(5) (\$16.00) Bank of America XX7116 100% of fair market value, up Savings account to any applicable statutory limit

Acct. No.: 7116

Line from
Schedule A/B:

17

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Debtor 1	Kieu		Leo		Case number (if known)		
	First Name	Middle Name	Last Name				
Part 2: Addit	ional Page						
	n of the property a		Current value of the portion you own	Amount of the exemption yo	ou claim	Specific laws that allow exemption	
			Copy the value from Schedule A/B	Check only one box for each	exemption.		
Brief description Neocad USA, L Line from Schedule A/B:			\$1.00	\$1.00 100% of fair market value to any applicable statutor		11 U.S.C. § 522(d)(5)	
Brief description Dallas Dental La Line from Schedule A/B:			\$1.00	\$1.00 100% of fair market value to any applicable statutor	· •	11 U.S.C. § 522(d)(5)	

IN RE: Leo, Kieu CASE NO

CHAPTER Chapter 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: Federal

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amoun Non-Exemp
1.	Real Estate	\$291,160.00	\$291,160.00	\$0.00	\$0.00	\$0.00
3.	Motor vehicle	\$6,700.00	\$0.00	\$6,700.00	\$6,700.00	\$0.00
4.	Watercraft, trailers, motors homes, and accessories	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6.	Household goods and furnishings	\$270.00	\$0.00	\$270.00	\$540.00	(\$270.00
7.	Electronics	\$300.00	\$0.00	\$300.00	\$300.00	\$0.00
8.	Collectibles of value	\$0.00	\$0.00	\$0.00	\$0.00	\$0.0
9.	Equipment for sports and hobbies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.0
10.	Firearms	\$0.00	\$0.00	\$0.00	\$0.00	\$0.0
11.	Clothes	\$200.00	\$0.00	\$200.00	\$200.00	\$0.0
12.	Jewelry	\$0.00	\$0.00	\$0.00	\$0.00	\$0.0
13.	Nonfarm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.0
14.	Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.0
16.	Cash	\$0.00	\$0.00	\$0.00	\$0.00	\$0.0
17.	Deposits of money	(\$206.65)	\$0.00	\$0.00	\$0.00	\$0.0
18.	Bonds, mutual funds, or publicly traded stocks	\$0.00	\$0.00	\$0.00	\$0.00	\$0.0
19.	Business Interests, LLC's, Partnerships, Joint Ventures and Nonpublicly traded stock	\$2.00	\$0.00	\$2.00	\$2.00	\$0.0
20.	Bonds and other financial instruments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.0
21.	Retirement or pension accounts	\$0.00	\$0.00	\$0.00	\$0.00	\$0.0
22.	Security deposits and prepayments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.0
23.	Annuities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.0
24.	Interest in a qualified education fund, such as an education IRA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.0
25.	Trusts, equitable or future interests in property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.0
26.	Copyrights, trademarks, websites and other intellectual property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.0
27.	Licenses, Franchises, and other general intangibles	\$0.00	\$0.00	\$0.00	\$0.00	\$0.0
28.	Tax refunds	\$0.00	\$0.00	\$0.00	\$0.00	\$0.0
29.	Family support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.0
30.	Other amounts owed to the debtor	\$0.00	\$0.00	\$0.00	\$0.00	\$0.0
31.	Insurance policies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.0
32.	Interest in property from deceased	\$0.00	\$0.00	\$0.00	\$0.00	\$0.0
33.	Claims against third parties	\$0.00	\$0.00	\$0.00	\$0.00	\$0.0

DALLAS DIVISION

IN RE: Leo, Kieu CASE NO

CHAPTER Chapter7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #1

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: Federal

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
34.	All other claims, includes contingent/unliquidated claims, counter claims, and creditor set offs	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35.	Other financial asset	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38.	Accounts receivable	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39.	Office equipment, furnishings, and supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
40.	Machinery, fixtures and equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
41.	Inventory	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
42.	Interests in partnerships or joint ventures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
43.	Customer lists	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
44.	Other businessrelated property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
47.	Farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
48.	Crops	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
49.	Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
50.	Supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
51.	Other farm or fishing related property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
53.	Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	TOTALS:	\$298,425.35	\$291,160.00	\$7,472.00	\$7,742.00	\$0.00

DALLAS DIVISION

CASE NO

IN RE: Leo, Kieu

CHAPTER Chapter7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #2

Surrendered Property:

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder

Property Description	Market Value	Lien	Equity
Real Property			_
(None)			
Personal Property			
(None)			
TOTALS:	\$0.00	\$0.00	\$0.00

Non-exempt Property by Item:

The following property, or a portion thereof, is non-exempt.

	•			
Property Description	Market Value	Lien	Equity	Non-Exempt Amount
Real Property				
(None)				
Personal Property				
(None)				
TOTALS:	\$298.425.35	\$291,160,00	\$7.472.00	\$0.00

Summary					
A. Gross Property Value (not including surrendered property)	\$298,425.35				
B. Gross Property Value of Surrendered Property	\$0.00				
C. Total Gross Property Value (A+B)	\$298,425.35				
D. Gross Amount of Encumbrances (not including surrendered property) \$291,160.					
E. Gross Amount of Encumbrances on Surrendered Property \$0.0					
F. Total Gross Encumbrances (D+E) \$291,160.					
G. Total Equity (not including surrendered property) / (A-D) \$7,472					
H. Total Equity in surrendered items (B-E)	\$0.00				
I. Total Equity (C-F)	\$7,472.00				
J. Total Exemptions Claimed (Wild Card Used: \$2,252.00, Available: \$13,173.00)	\$7,742.00				
K. Total Non-Exempt Property Remaining (G-J)	\$0.00				

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			Document F	Page 26 of 7	1		
Fill in this inform	nation to identify you						
Dobtor 1	Vieu		Loo				
Debtor 1	Kieu First Name	Middle Name	Leo Last Name				
	Tilstivanie	Wilddie Hame	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court fo	r the: Northe	ern District	of Texas			
Case number (if						
known)				-			this is an
						amende	a filing
Official For	m 106D						
Schodu	lo Di Cro	ditors Who	Lavo Cl	aims Soc	urod by E	Proporty	40/45
<u> 3Criedu</u>	ie D. Cie	COLLOIS WITE	Thave Cia		ured by F	Toperty	12/15
		ossible. If two married					
		dditional Page, fill it o	ut, number the entrie	es, and attach it to	this form. On the top	o of any additional pag	jes, write your
	number (if known)						
I. Do any cred	litors have claims	secured by your prope	erty?				
		mit this form to the court	with your other sched	dules. You have noth	ning else to report on	this form.	
✓ Yes. Fill	in all of the informat	tion below.					
Part 1:	_ist All Secured	Claims					
					0.1	0.1 5	0.1.0
		reditor has more than or	, ,		Column A	Column B	Column C
		ore than one creditor ha spossible, list the claims	•		Amount of claim	Value of collateral that supports this	Unsecured portion
creditor's na		s possible, list the claims	in alphabetical order	according to the	Do not deduct the	claim	•
0.4					value of collateral.		If any
2.1 Austin Ba		Describe	the property that se	cures the claim:	\$75,169.00	\$291,160.00	\$0.00
Creditor's I		1818 Wa	rwick St Garland, TX	75044			
Attn: Ban	kruptcy		·				
PO Box 9	51	As of the	date you file, the cla	im is: Check all tha	t apply.		
Number	Street	☐ Contir	ngent				
Jacksonv	ille, TX 75766	Unliqu	•				
City	State	ZIP Code Disput					
Who owe:	s the debt? Check	one. Nature of	lien. Check all that a	pply.			
✓ Debtoi	r 1 only	☐ An ag	reement you made (si	uch as mortgage or	secured car loan)		
	☐ Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien)						
☐ Debtor 1 and Debtor 2 only ☐ Judgment lien from a lawsuit							
☐ At least one of the debtors and ☐ Other (including a right to							
anothe	er	offset)					
	if this claim relate unity debt	es to a					
Date debt	was incurred	11/1/2021 Last 4 dig	gits of account numb	oer <u>1 1 2</u>	<u>1</u>		

\$75,169.00

Add the dollar value of your entries in Column A on this page. Write that number here:

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Debtor 1 Kieu Leo Case number (if known) Middle Name First Name Last Name Column A Column B Column C Additional Page Value of collateral Amount of claim Unsecured Part 1: that supports this portion After listing any entries on this page, number them beginning with 2.3, Do not deduct the followed by 2.4, and so forth. claim value of collateral. If any 2.2 Cit Bank Na/loancare Describe the property that secures the claim: \$254,019.00 \$291,160.00 \$0.00 Creditor's Name 1818 Warwick St Garland, TX 75044 3637 Sentara Way Number Street As of the date you file, the claim is: Check all that apply. Contingent Virginia Beach, VA 23452 Unliquidated City State ZIP Code Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. ✓ Debtor 1 only ☐ An agreement you made (such as mortgage or secured car loan) Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Debtor 1 and Debtor 2 only Judgment lien from a lawsuit ■ At least one of the debtors and Other (including a right to another offset) ☐ Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number 6 Add the dollar value of your entries in Column A on this page. Write that number here: \$254,019.00 If this is the last page of your form, add the dollar value totals from all pages. \$329,188.00

Write that number here:

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	Ous	C 24 00012 39j1 D	Document Page 28 of 71	.4 10.01.00	<i>D</i> C3C1	viairi
Fill	in this inform	nation to identify your case:				
D	obtor 1	Vieu	Loo			
DE	ebtor 1	Kieu First Name Middle I	Leo Name Last Name			
_	- h t - = 0	The triang	200.110.110			
	ebtor 2 pouse, if filing)	First Name Middle I	Name Last Name			
	3,	i ii st i vaine i wiiddie i				
Ur	nited States E	Bankruptcy Court for the:	Northern District of Texas			
Ca	ase number				—	
(if	known)					if this is an ded filing
	ficial Fam	400F/F		•		J
Oli	liciai Foi	m 106E/F				
Sc	chedu	le E/F: Credito	rs Who Have Unsecured Cla	aims		12/15
Forn clain num	n 106A/B) ar ns that are l	nd on Schedule G: Executory (isted in Schedule D: Creditors ies in the boxes on the left. At	pired leases that could result in a claim. Also list executory Contracts and Unexpired Leases (Official Form 106G). Do no Who Have Claims Secured by Property. If more space is no each the Continuation Page to this page. On the top of any a	ot include any c eded, copy the	reditors with p Part you need	partially secured , fill it out,
Р	Part 1:	ist All of Your PRIORITY L	Insecured Claims			
1.	Do any cre	editors have priority unsecured	I claims against you?			
	✓ No. Go ☐ Yes.					
2.	claim listed amounts. A fill out the C	, identify what type of claim it is. s much as possible, list the clain Continuation Page of Part 1. If mo	. If a creditor has more than one priority unsecured claim, list the If a claim has both priority and nonpriority amounts, list that claims in alphabetical order according to the creditor's name. If you have than one creditor holds a particular claim, list the other creditives the instructions for this form in the instruction booklet.)	m here and show have more than to	both priority a	nd nonpriority
		,,	,	Total claim	Priority amount	Nonpriority amount
2.	1		Local Addition of account on the		amount	umount
۷.	-	aditor'a Nama	Last 4 digits of account number			_
	Priority Cre	editor's Name	When was the debt incurred?			
	Number	Street	-			
			As of the date you file, the claim is: Check all that apply.			
			Contingent			
	City	State ZIP Code	☐ Unliquidated			
	•		☐ Disputed			
	_	rred the debt? Check one.	Torre of BRIGRITY conserver 1 1 1			
	☐ Debtor☐ Debtor	•	Type of PRIORITY unsecured claim:			
		1 2 only 1 1 and Debtor 2 only	Domestic support obligations			
		st one of the debtors and another	☐ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxic	ated		
	☐ Check	t if this claim is for a unity debt	Other. Specify			

☐ No☐ Yes

Is the claim subject to offset?

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| Kieu | First Name | Middle Name | Last Name | La

Pa	rt 2: List All of Your NONPRIORITY Unsecured	d Claims
3.	Do any creditors have nonpriority unsecured claims aga	inst you?
	☐ No. You have nothing to report in this part. Submit this fo✓ Yes	rm to the court with your other schedules.
	nonpriority unsecured claim, list the creditor separately for ea	abetical order of the creditor who holds each claim. If a creditor has more than one ach claim. For each claim listed, identify what type of claim it is. Do not list claims already r claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured
		Total claim
4.1	Bank of America	Last 4 digits of account number 1 7 4 7 \$3,565.92
	Nonpriority Creditor's Name	
	Attn: Bankruptcy	When was the debt incurred?
	P.O. BOX 660441	
	Number Street	As of the date you file, the claim is: Check all that apply.
	Dallas, TX 75266-0441	Contingent
	City State ZIP Code	☐ Unliquidated ☐ Disputed
	Who incurred the debt? Check one.	□ Disputed
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:
	Debtor 2 only	☐ Student loans
	☐ Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as
	☐ At least one of the debtors and another	priority claims Debts to pension or profit-sharing plans, and other similar debts
	☐ Check if this claim is for a community debt	☑ Other. Specify Business Debt-Personal Guaranty
	Is the claim subject to offset?	· · · · · · · · · · · · · · · · · · ·
	√ No	
	☐ Yes	
4.2	Citibank	Last 4 digits of account number 7 5 8 1 \$3,561.00
	Nonpriority Creditor's Name	
	Citicorp Cr Srvs/Centralized Bankruptcy	When was the debt incurred? 5/1/2022
	PO Box 790104	
	Number Street	As of the date you file, the claim is: Check all that apply.
	Saint Louis, MO 63179	☐ Contingent
	City State ZIP Code	☐ Unliquidated ☐ Disputed
	Who incurred the debt? Check one.	
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:
	☐ Debtor 2 only	Student loans
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts
	☐ Check if this claim is for a community debt	☑ Other. Specify CreditCard
	Is the claim subject to offset?	
	☑ No	

Yes

Doc 1 Filed 03/25/24 Entered 03/25/24 10:51:59 Desc Main Case 24-30812-sgj7 Page 30 of 71 Document Debtor 1 Kieu Leo Case number (if known) _ First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims — Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total claim** 4.3 Credence Resource Management, LLC Last 4 digits of account number 7 8 8 9 \$1,399.00 Nonpriority Creditor's Name When was the debt incurred? 12/1/2023 Attn: Bankruptcy 4222 Trinity Mills Road Suite 260 As of the date you file, the claim is: Check all that apply. Number Street Contingent Dallas, TX 75287 Unliquidated State ZIP Code City Disputed Who incurred the debt? Check one.

	✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	Debtor 2 only	Student loansObligations arising out of a separation agreement or divorce that you did not report as				
	 □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt 	priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CollectionAttorney				
	Is the claim subject to offset?					
	☑ No □ Yes					
4.4	Department of US Treasury	Last 4 digits of account number 8 0 0 9 \$487,187.53				
	Nonpriority Creditor's Name Attn: Bureau of Fiscal Service	When was the debt incurred?				
	PO Box 830794	As of the date conflict the elements Observed All that each				
	Number Street Birmingham, AL 35283-0794	As of the date you file, the claim is: Check all that apply. Contingent				
	City State ZIP Code	☐ Unliquidated ☐ Disputed				
	Who incurred the debt? Check one. ✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	☐ Debtor 2 only	☐ Student loans				
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 				
	•	✓ Other. Specify Business Debt-Personal Guaranty				

✓ No ☐ Yes

Is the claim subject to offset?

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Pa	rt 2: Your NONPRIORITY Unsecured Claims —	Continuation Page				
Afte	r listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so fo	rth.	Total claim		
4.5	Fnb Omaha	Last 4 digits of account number	9 4 4 8	\$12,828.00		
	Nonpriority Creditor's Name	When was the debt incurred?	8/1/2022			
	Attn: Bankruptcy	when was the debt incurred?	6/1/2022			
	P.O. Box 3128					
	Number Street	As of the date you file, the claim is	s: Check all that apply.			
	Omaha, NE 68103	Contingent				
	City State ZIP Code	☐ Unliquidated☐ Disputed				
	Who incurred the debt? Check one.	_ Disputed				
	☑ Debtor 1 only	Type of NONPRIORITY unsecured	claim:			
	Debtor 2 only	☐ Student loans				
	☐ Debtor 1 and Debtor 2 only	Obligations arising out of a sepa	ration agreement or divorce that y	ou did not report as		
	☐ At least one of the debtors and another	priority claims Debts to pension or profit-sharing	n plans, and other similar debts			
	☐ Check if this claim is for a community debt	✓ Other. Specify CreditCard	g plane, and other chillian dobto			
	Is the claim subject to offset?	_ , ,				
	☑ No					
	☐ Yes					
4.0						
4.6	Forward Financing	Last 4 digits of account number		\$45,000.00		
	Nonpriority Creditor's Name	When was the debt incurred?				
	Attn: Bankruptcy					
	53 State Street 20th Floor	As of the date you file, the claim is	e: Check all that apply			
	Number Street	Contingent	S. Oneok all that apply.			
	Boston, MA 02109	Unliquidated				
	City State ZIP Code	☐ Disputed				
	Who incurred the debt? Check one.	·				
	☑ Debtor 1 only	Type of NONPRIORITY unsecured	claim:			
	☐ Debtor 2 only	☐ Student loans				
	Debtor 1 and Debtor 2 only	 Obligations arising out of a sepa priority claims 	ration agreement or divorce that y	ou did not report as		
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts				
	☐ Check if this claim is for a community debt	☑ Other. Specify Business Debt-F				
	Is the claim subject to offset?					
	☑ No					
	Yes					
4.7	E 0.0			#05.000.00		
	Fundkite Nonpriority Creditor's Name	Last 4 digits of account number		\$35,000.00		
	• •	When was the debt incurred?				
	Attn: Bankruptcy					
	2 S Biscayne Blvd 23rd Floor	As of the date you file, the claim is	s: Check all that apply.			
	Number Street	☐ Contingent	,			
	Miami, FL 33131 City State ZIP Code	☐ Unliquidated				
	City State ZIP Code	☐ Disputed				
	Who incurred the debt? Check one.	Type of NONDRIORITY unaccured	alaim.			
	Debtor 1 only	Type of NONPRIORITY unsecured Student loans	Ciailli.			
	Debtor 2 only	Student loansObligations arising out of a sepa	ration agreement or divorce that w	ou did not report as		
	Debtor 1 and Debtor 2 only	priority claims	ration agreement of divorce that y	ou did not report as		
	At least one of the debtors and another	Debts to pension or profit-sharing				
	☐ Check if this claim is for a community debt	✓ Other. Specify Business Debt-F	Personal Guaranty			
	Is the claim subject to offset?					
	☑ No					
	☐ Yes					

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Debtor 1 Kieu Document Page 32 of 71
Leo Case number (if known)
First Name Middle Name Last Name

Pa	rt 2: Your NONPRIORITY Unsecured Claims —	Continuation Page
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth. Total claim
4.8	GoodLeap Llc.	Last 4 digits of account number 0 7 4 4 4 \$77,277.00
	Nonpriority Creditor's Name	When was the debt incurred? 8/1/2023
	Attn: Bankruptcy	when was the debt incurred? 6/1/2023
	8781 Sierra College Blvd	
	Number Street	As of the date you file, the claim is: Check all that apply.
	Roseville, CA 95661	Contingent
	City State ZIP Code	☐ Unliquidated☐ Disputed☐
	Who incurred the debt? Check one.	Disputed
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:
	☐ Debtor 2 only	☐ Student loans
	Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as
	☐ At least one of the debtors and another	priority claims Debts to pension or profit-sharing plans, and other similar debts
	☐ Check if this claim is for a community debt	✓ Other. Specify Unsecured
	In the plaim publicat to offeet?	Office: Opeciny Officecured
	Is the claim subject to offset? ☑ No	
	☑ Yes	
	ies	
4.9	Greenwich Capital	Last 4 digits of account number \$60,000.00
	Nonpriority Creditor's Name	When was the debt incurred?
	Attn: Bankruptcy	when was the debt incurred:
	515 N Flagler Drive 300	
	Number Street	As of the date you file, the claim is: Check all that apply.
	West Palm Beach, FL 33401	Contingent
	City State ZIP Code	Unliquidated
	Who incurred the debt? Check one.	☐ Disputed
	✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:
	Debtor 2 only	☐ Student loans
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as
	☐ At least one of the debtors and another	priority claims
	☐ Check if this claim is for a community debt	☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Business Debt-Personal Guaranty
		Other. Specify Business Debt-Personal Guaranty
	Is the claim subject to offset?	
	☑ No □ Yes	
	☐ Yes	
4.10	Mantis Funding	Last 4 digits of account number unknown
	Nonpriority Creditor's Name	When we she debt incomed?
	Attn: Bankruptcy	When was the debt incurred?
	2700 N Military Trl 450	
	Number Street	As of the date you file, the claim is: Check all that apply.
	Boca Raton, FL 33431	Contingent
	City State ZIP Code	Unliquidated
	Who incurred the debt? Check one.	☐ Disputed
	Debtor 1 only	Type of NONPRIORITY unsecured claim:
	Debtor 1 only Debtor 2 only	☐ Student loans
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as
	☐ At least one of the debtors and another	_ priority claims
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts
	·	☑ Other. Specify Business Debt-Personal Guaranty
	Is the claim subject to offset?	
	☑ No	
	☐ Yes	

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Pa	t 2: Your NONPRIORITY Unsecured Claims —	Continuation Page				
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth.	Total claim			
4.11	Smart Business	Last 4 digits of account number	\$40,000.00			
	Nonpriority Creditor's Name	When was the debt incurred?				
	Attn: Bankruptcy	when was the debt incurred:				
	20515 NE 22nd Avenue					
	Number Street	As of the date you file, the claim is: Check all that apply.				
	Miami, FL 33180	☐ Contingent				
	City State ZIP Code	□ Unliquidated □ Disputed				
	Who incurred the debt? Check one.	☐ Disputed				
	✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	Debtor 2 only	☐ Student loans				
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not a separation agreement or	ot report as			
	☐ At least one of the debtors and another	priority claims	•			
	☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts				
	— • • • • • • • • • • • • • • • • • • •	✓ Other. Specify Business Debt-Personal Guaranty				
	Is the claim subject to offset?					
	☑ No					
	☐ Yes					
4.12	Synchrony/PayPal Credit	Last 4 digits of account number 9 0 6 6	\$928.00			
	Nonpriority Creditor's Name	<u> </u>				
	Attn: Bankruptcy	When was the debt incurred? 5/1/2015				
	PO Box 965060	-				
	Number Street	As of the date you file, the claim is: Check all that apply.				
	Orlando, FL 32896-5060	☐ Contingent				
	City State ZIP Code	□ Unliquidated □ Disputed				
	Who incurred the debt? Check one.	☐ Disputed				
	☑ Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	Debtor 2 only	☐ Student loans				
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did no	ot report as			
	☐ At least one of the debtors and another	priority claims				
	Check if this claim is for a community debt	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify CreditCard				
	Is the claim subject to offset?					
	√ No					
	☐ Yes					

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Last Name

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Part 4:

Middle Name

First Name

Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim. **Total claim Total claims Domestic support obligations** 6a. \$0.00 from Part 1 6b. Taxes and certain other debts you owe the government 6b. \$0.00 Claims for death or personal injury while you were \$0.00 intoxicated Other. Add all other priority unsecured claims. \$0.00 6d. 6d. Write that amount here. Total. Add lines 6a through 6d. 6e. \$0.00 **Total claim Total claims** 6f. Student loans 6f. \$0.00 from Part 2 Obligations arising out of a separation agreement or \$0.00 6g. 6g. divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other 6h. \$0.00 similar debts Other. Add all other nonpriority unsecured claims. 6i. 6i. \$766,746.45 Write that amount here. Total. Add lines 6f through 6i. 6j. \$766,746.45

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Fill in this information	n to identify your case:				
Debtor 1	Kieu		Leo		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bank	ruptcy Court for the:		Northern District of Texas		
Case number (if known)					Check

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☑ Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with wh	om you ha	ve the contract or lease	State what the contract or lease is for
2.1	Hung x N	guyen			Office Space Contract to be ASSUMED
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	

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				Document Page	37 Of 71	•	
Fill in	this inform	nation to identify yo	ur case:				
Deb	tor 1	Kieu		Leo			
		First Name	Middle Name	Last Name			
	tor 2 use. if filing)	First Name	Middle Name	Last Name			
			N. a		Texas		
		Bankruptcy Court fo	or the:	District of	Texas		
	e number lown)						ck if this is an nded filing
Offic	cial For	m 106H					
Scl	hedu	le Η: Υοι	ur Codebto	ors			12/15
he en	tries in the n). Answer	e boxes on the lef every question.	t. Attach the Additiona		op of any Additional F	opy the Additional Page, fill i Pages, write your name and o	
	✓ No ☐ Yes	are any coucuston		in oddo, do not liet olinor oped	30 40 4 00453.01.)		
	No. G Yes. D Yes. D Yes. D	o to line 3. Did your spouse, for one of the community of	rmer spouse, or legal ed		ne?	name and current address of t	hat person.
	N	umber	Street				
	C	ity	State	ZIP Code			
3.	2 again a	s a codebtor only	if that person is a gua	rantor or cosigner. Make su	re you have listed the	filing with you. List the pers creditor on <i>Schedule D</i> (Offi le <i>E/F</i> , or <i>Schedule G</i> to fill on	cial Form 106D),
	Column 1	: Your codebtor			Column 2: T	he creditor to whom you owe	the debt
					Check all sch	nedules that apply:	
3.1						e D, line	
	Name					e E/F, line	
	Number		Street			e G, line	
	City		State	ZIF	² Code	. G, iiie	
3.2							
	Name				☐ Schedule	e D, line	
	Number		Stroot		Schedule	e E/F, line	
	Number		Street		☐ Schedule	e G, line	

ZIP Code

State

City

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		Doc	ument F	age	e 38 of <i>i</i>	<u>/1</u>			
Fill	I in this information to identify	your case:							
D	ebtor 1 Kieu	L	.eo						
	First Nam	ne Middle Name La	ast Name						
_	ebtor 2								
(8	Spouse, if filing) First Nam	ne Middle Name La	ast Name				Check if this is:	_	
U	nited States Bankruptcy Cour	t for the: North	ern District of To	exas		-	An amended filin A supplement sh	•	tn atition
С	ase number						chapter 13 incom		
(if	known)								
							MM / DD / YYYY		
Of	ficial Form 106I								
Sc	chedule I: You	r Income							12/15
		possible. If two married people	e:::			514 6) 1			
Ра	rt 1: Describe Employm	ne and case number (if known). A			11.				
	information.		Debtor '	1			Debtor 2 or no	n-filing sp	ouse
	If you have more than one jo	ob, Employment status	☑ Employee	d 🗆 N	lot Employe	ed	□ Employed □ N	ot Employ	ed
	attach a separate page with information about additional	Occupation							
	employers.	•							
	Include part time, seasonal,	or Employer's name	Neocad USA	4					
	self-employed work.	Employer's address							
	Occupation may include stu- or homemaker, if it applies.	dent	Number Stre	et			Number Street		
	, , , , , , , , , , , , , , , , , , , ,								
			City		State	Zip Code	City	State	Zip Code
		How long employed then	e?						
Pa	art 2: Give Details Abou	t Monthly Income							
	Estimate monthly income a unless you are separated.	s of the date you file this form. It	f you have nothi	ng to	report for a	ny line, write	\$0 in the space. Include	your non-f	iling spouse
	If you or your non-filing spou more space, attach a separa	use have more than one employed ate sheet to this form.	r, combine the ir	nforma	ation for all	employers fo	or that person on the lines	below. If y	you need
					Foi	r Debtor 1	For Debtor 2 or non-filing spouse		
2.		salary, and commissions (before thly, calculate what the monthly w		2.		\$0.00	\$0.00		
3.	Estimate and list monthly of	vertime pay.		3.	+	\$0.00	+ \$0.00		
	,					+0.00	7	٦	

\$0.00

\$0.00

4. Calculate gross income. Add line 2 + line 3.

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Debtor 1 Kieu Leo Case number (if known) _____

Last Name

First Name

Middle Name

			For Debtor 1	For Debtor 2 or non-filing spouse	
	Copy line 4 here→	4.	\$0.00	\$0.00	
5.	List all payroll deductions:				
	5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00	\$0.00	
	5b. Mandatory contributions for retirement plans	5b.	\$0.00	\$0.00	
	5c. Voluntary contributions for retirement plans	5c.	\$0.00	\$0.00	
	5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00	
	5e. Insurance	5e.	\$0.00	\$0.00	
	5f. Domestic support obligations	5f.	\$0.00	\$0.00	
	5g. Union dues	5g.	\$0.00	\$0.00	
	5h. Other deductions. Specify:	5h	+ \$0.00	+ \$0.00	
6.	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$0.00	\$0.00	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00	\$0.00	
8.	List all other income regularly received:	••			
	8a. Net income from rental property and from operating a business, profession, or farm				
	Attach a statement for each property and business showing gross				
	receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$5,000.00	\$0.00	
	8b. Interest and dividends	8b.	\$0.00	\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	ob.	<u> </u>	<u> </u>	
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$0.00	
	8d. Unemployment compensation	8d.	\$0.00	\$0.00	
	8e. Social Security	8e.	\$0.00	\$0.00	
	8f. Other government assistance that you regularly receive		<u> </u>		
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.				
	Specify:	8f.	\$0.00	\$0.00	
	8g. Pension or retirement income	8g.	\$0.00	\$0.00	
	8h. Other monthly income. Specify:		+ \$0.00	+ \$0.00	
0		. [\$5,000,00	\$0.00	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$5,000.00	φ0.00	
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$5,000.00	\$0.00	\$5,000.00
11.	State all other regular contributions to the expenses that you list in Scheo	lule J.			
	Include contributions from an unmarried partner, members of your household friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that a		, ,	·	
	Specify:			. 11. -	\$ 0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The amount on the Summary of Your Assets and Liabilities and Certain Statistics			come. Write that	\$5,000.00
					Combined monthly income
13.	Do you expect an increase or decrease within the year after you file this fo	orm?			,.
	☑No.				
	Yes. Explain:				 _

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Debtor 1 Kieu Leo Case number (if known) -First Name Middle Name Last Name 8a. Attached Statement **Self Employment Business Income- Neocad** FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.) PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME: \$5,000.00 1. Gross Monthly Income: PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES: Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition **Business Debts** TOTAL PAYMENTS TO SECURED CREDITORS \$0.00 3. Other Expenses TOTAL OTHER EXPENSES \$0.00 \$0.00 4. TOTAL MONTHLY EXPENSES(Add item 2 - 21) PART C - ESTIMATED AVERAGE NET MONTHLY INCOME: 5. AVERAGE NET MONTHLY INCOME(Subtract item 22 from item 1) \$5,000.00

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Fill in this informatio	n to identify your case	:			
Debtor 1	Kieu First Name	Middle Name	Leo Last Name	Check if this is:	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	An amended filing A supplement showing postpeti expenses as of the following da	
Case number	kruptcy Court for the:		Northern District of Texas		
Official Form	- 400 l				

Official Form 1063

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more

Space is needed, attach another sneet to		tional pages, write your name and ca	ise number (ii k	mown). Answer every question.
Part 1: Describe Your Household 1. Is this a joint case? ✓ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a sep	parate household?			
Yes. Debtor 2 must file 2. Do you have dependents? Do not list Debtor 1 and Debtor 2. Do not state the dependents' names.	Official Form 106J-2, Expenses for No No Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2 Child	Dependent's age	Does dependent live with you? No. Yes. No. Yes. No. Yes. No. Yes.
Do your expenses include expenses of people other than yourself and your dependents?	☑ No □ _{Yes}			— □No. □Yes.
Part 2: Estimate Your Ongoing I Estimate your expenses as of your bar date after the bankruptcy is filed. If this	nkruptcy filing date unless you are	•	•	•
Include expenses paid for with non-ca such assistance and have included it of			Y	our expenses
The rental or home ownership exp for the ground or lot.	enses for your residence. Include f	first mortgage payments and any rent	4	\$2,606.00
If not included in line 4:				
4a. Real estate taxes			4a. <u> </u>	\$0.00
4b. Property, homeowner's, or rente	er's insurance		4b	\$0.00
4c. Home maintenance, repair, and	upkeep expenses		4c	\$0.00
4d. Homeowner's association or col	ndominium dues		4d. —	\$484.00

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		You	ur expenses
5. Additio	onal mortgage payments for your residence, such as home equity loans	5.	\$549.00
6. Utilitie s	s:		
	ctricity, heat, natural gas	6a. <u>—</u>	\$400.00
	ter, sewer, garbage collection	6b	\$0.00
6c. Tele	ephone, cell phone, Internet, satellite, and cable services		\$590.00
6d. Oth	ner. Specify:	6d.	\$0.00
	nd housekeeping supplies	7.	\$800.00
3. Childca	are and children's education costs	8.	\$0.00
). Clothin	ng, laundry, and dry cleaning	9.	\$25.00
0. Person	nal care products and services	10.	\$50.00
11. Medica	al and dental expenses	11.	\$150.00
	ortation. Include gas, maintenance, bus or train fare.	12.	\$200.00
	include car payments. sinment, clubs, recreation, newspapers, magazines, and books	13.	\$0.00
	able contributions and religious donations	14.	\$83.33
14. Ollania	ine contributions and religious donations		ψ03.33
15. Insurar Do not	nce. include insurance deducted from your pay or included in lines 4 or 20.		
15a. Lif	fe insurance	15a	\$0.00
15b. He	ealth insurance	15b	\$0.00
15c. Ve	ehicle insurance	15c	\$0.00
15d. Ot	ther insurance. Specify:	15d.	\$0.00
16. Taxes.	Do not include taxes deducted from your pay or included in lines 4 or 20.		
	r	16.	\$0.00
7. Installn	nent or lease payments:		
17a. Ca	ar payments for Vehicle 1	17a	\$0.00
	ar payments for Vehicle 2	17b.	\$0.00
17D. C	ai paymento iti venicie z	17c.	\$0.00
17c. Ot	her. Specify:	17d.	\$0.00
17d. Ot	ther. Specify:	_	Ψο.σο
	ayments of alimony, maintenance, and support that you did not report as deducted our pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$0.00
19. Other p	payments you make to support others who do not live with you.		
Specify	r	19.	\$0.00
20. Other r	real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income	ome.	
20a. M	ortgages on other property	20a	\$0.00
	eal estate taxes	20b	\$0.00
	operty, homeowner's, or renter's insurance	20c.	\$0.00
	aintenance, repair, and upkeep expenses	20d.	\$0.00
20e. Ho	omeowner's association or condominium dues	20e.	\$0.00

tor 1	Kieu		Leo	Case number	(if known)
	First Name	Middle Name	Last Name		
Other. Spe	cify:			21.	+\$0.00
Calculate y	your monthly exp	enses.			
22a. Add lii	nes 4 through 21.			22a.	\$5,937.33
22b. Copy	line 22 (monthly e	expenses for Debtor 2), i	f any, from Official Form 106J-2	22b.	\$0.00
22c. Add lir	ne 22a and 22b. T	he result is your monthl	y expenses.	22c.	\$5,937.33
Calculate y	your monthly net	income.			
23а. Сору	line 12 (your com	bined monthly income) f	rom Schedule I.	23a.	\$5,000.00
23b. Copy	your monthly expe	enses from line 22c abo	ve.	23b.	- \$5,937.33
23c. Subtra	act your monthly e	expenses from your mon	thly income.		
The re	esult is your mont	hly net income.		23c.	(\$937.33)
Do you exp	pect an increase of	or decrease in your exp	enses within the year after you f	ile this form?	
☑ No. ☐ Yes.	None				
	Calculate y 22a. Add li 22b. Copy 22c. Add li Calculate y 23a. Copy 23b. Copy 23c. Subtra The r Do you ex For examp mortgage p	Calculate your monthly exp 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly exp 22c. Add line 22a and 22b. The calculate your monthly net 23a. Copy line 12 (your comb 23b. Copy your monthly exp 23c. Subtract your monthly exp 24 No. None	Calculate your monthly expenses. 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if 22c. Add line 22a and 22b. The result is your monthly Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) for 23b. Copy your monthly expenses from line 22c about 23c. Subtract your monthly expenses from your monthly result is your monthly net income. Do you expect an increase or decrease in your expenses payment to increase or decrease because No.	Other. Specify: Calculate your monthly expenses. 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22c above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. Do you expect an increase or decrease in your expenses within the year after you for example, do you expect to finish paying for your car loan within the year or do your montgage payment to increase or decrease because of a modification to the terms of your None None	Other. Specify:

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Fill in this information	to identify your case				
Debtor 1	Kieu		Leo		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankr	ruptcy Court for the:	1	Northern District of Texas		
Case number					☐ CI
(if known)					ar

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all

of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your origin new <i>Summary</i> and check the box at the top of this page.	al forms, you must fill out a
Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from Schedule A/B	\$291,160.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$7,265.35
1c. Copy line 63, Total of all property on Schedule A/B	\$298,425.35
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$329,188.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$766,746.45
Your total liabilities	\$1,095,934.45
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$5,000.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$5,937.33

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Debtor 1 Kieu Leo Case number (if known). First Name Middle Name Last Name Part 4: Answer These Questions for Administrative and Statistical Records 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. **√** Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: **Total claim** From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

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Fill in this information to identify your case:					
Debtor 1	Kieu		Leo		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankı	ruptcy Court for the:		Northern District of Texas		
Case number (if known)					

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did.	
Did you pay or agree to pay someone who is NOT an a	ttorney to neip you fill out bankruptcy forms?
√ 1 No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the	summary and schedules filed with this declaration and that they are true and correct.
/s/ Kieu Leo	_
Kieu Leo, Debtor 1	
Date 03/25/2024 MM/ DD/ YYYY	
וווו ועט אוואו	

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Fill in this information to identify your case:					
Debtor 1	Kieu		Leo		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankr	uptcy Court for the:		Northern District of Texas		
Case number					
(if known)					

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

3 years, have you lived anywhere ot	her than where you liv	ve now?		
	ears. Do not include wh Dates Debtor 1 lived here	Debtor 2:		Dates Debtor 2 live there
		Same as Debtor 1		☐ Same as Debtor 1
Fr 	o	Number Street		- From To
State ZIP Code		City	State ZIP Code	-
		Same as Debtor 1		Same as Debtor 1
Fr To	rom	Number Street		- From To
State ZIP Code		City	State ZIP Code	-
То	rom	Number Street	State ZIP Code	From

Debtor 1 Kieu Leo Case number (if known) _ First Name Middle Name Last Name Part 2: Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross Income** Sources of income **Gross Income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ■ Wages, commissions, ■ Wages, commissions, From January 1 of current year until the bonuses, tips bonuses, tips date you filed for bankruptcy: ✓ Operating a business \$5,200.00 Operating a business ■ Wages, commissions, For last calendar year: Wages, commissions, bonuses, tips bonuses, tips (January 1 to December 31, 2023 ☑ Operating a business \$60,000.00 Operating a business ■ Wages, commissions, Wages, commissions, For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2022 ✓ Operating a business \$52,000.00 Operating a business 5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. **√** No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross Income from** each source each source Describe below. Describe below. (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, For the calendar year before that: (January 1 to December 31, 2022

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_					Docume		e 49 of		10.51.59	Desc Main
or 1	Kieu				Leo			Case	number (if kno	own)
	First N		Middle Na		Last Name					
3: L	ist Certa	in Paymer	nts You Ma	ade Before	You Filed	for Bankrup	itcy			
re eith	er Debtor 1	l's or Debtor	2's debts p	rimarily con	sumer debts?	,				
1 No.	Neither I an individ	Debtor 1 nor dual primarily	Debtor 2 hay for a perso	as primarily nal, family, o	consumer de or household p	bts. Consume ourpose."	er debts are	defined in 11 U.S	S.C. § 101(8)	as "incurred by
	During th	ne 90 days b	efore you file	ed for bankr	uptcy, did you	pay any credi	tor a total o	f \$7,575* or more	e?	
	_	o to line 7.								
	√ Yes.	paid that cr	editor. Do n	ot include p		omestic suppo		e or more paymens, such as child		otal amount you alimony. Also, do
	* Subject	t to adjustme	ent on 4/01/2	5 and every	3 years after	that for cases	filed on or a	after the date of	adjustment.	
Yes.					consumer de			f (1000 on mone)		
	J	o to line 7.	erore you ill	ed for bankr	uptcy, ala you	pay any credi	tor a total o	f \$600 or more?		
	Yes.	include pay		omestic sup	port obligation			total amount you and alimony. Also		
					tes of ment	Total amou	nt paid	Amount you	still owe	Was this payment for
	Citibank			1/1/	2024	9	3,000.00			Mortgage
	Creditor's N	ame]Car
	PO Box 9	001016							_	Credit card
	Number	Street								Loan repayment
	Louisville,	KY 40290								
	City	St	ate ZIP C	ode						Suppliers or vendors
										Other
ders indare and rate as	clude your officer, dir s a sole pro	relatives; an ector, perso	y general pan n in control, .S.C. § 101.	artners; relator or owner of	ives of any ge 20% or more	eneral partners of their voting	s; partnersh securities; a		are a generaling agent, inclu	l partner; corporations of wuding one for a business you
				Dates		Total amount	paid Amo	ount you still	Reason for	r this payment
				Payin			3116			
sider's N	Name			<u> </u>						
umber	Street									
umber	Street									

or 1	Kieu		Docur _{Leo}	ment Page 5	0 01 71	Case nur	mber (if know	n)
	First Name	Middle Name	Last Nan	ne	_	Case nui	ilibei (ii kriow	
lude pay ∡ No	yments on debts guara	anteed or cosigne	d by an insider.	/ payments or transfe	r any property o	n accoun	t of a debt th	at benefited an insid
_ Yes. L	List all payments that b	enefited an inside	Dates of payment	Total amount paid	Amount you sowe		Reason for t	his payment or's name
sider's N	Name							
lumber	Street	·						
City	State	ZIP Code						
tract dis	h matters, including pe			in any lawsuit, court a actions, divorces, collec				custody modification
tract dis ☑No	h matters, including pe	ersonal injury case	es, small claims a	actions, divorces, collec	ction suits, paterr			
tract dis ☑No ☑Yes. F	n matters, including pesputes. Fill in the details.	ersonal injury case		ctions, divorces, collections, divorces, collections	ction suits, paterrunts, pater			Status of the case ✓ Pending
tract dis ☑No ☑Yes. F	n matters, including pesputes. Fill in the details. Expression of the period of the	Nature vs	es, small claims a	ctions, divorces, collections, divorces, collections	urt or agency Arbitration			Status of the case
tract dis ☑No ☑Yes. F	n matters, including pesputes. Fill in the details. e Forward Financ Neocad	Nature vs	es, small claims a	Co AAA Court	urt or agency Arbitration			Status of the case ✓ Pending ☐ On appeal
No Yes. F	h matters, including persputes. Fill in the details. Forward Financ Neocad mber 01-23-0005-453	Nature vs	es, small claims a	Co AAA Couri	urt or agency Arbitration Name Der Street Arbitration	nity action	s, support o	Status of the case ✓ Pending ☐ On appeal
No Yes. Fase title	h matters, including persputes. Fill in the details. Forward Financ Neocad mber 01-23-0005-453	Nature vs	es, small claims a	Co AAA Court Numl City AAA Court	urt or agency Arbitration Name Street Arbitration Name	nity action	s, support o	Status of the case Pending On appeal Concluded Pending On appeal
No Yes. F Case title Case title	matters, including persputes. Fill in the details. Forward Financ Neocad mber 01-23-0005-453 Funkite vs Leo Fermore 45345/2023 Funkite vs Leo Fermore 45345/2023	Nature vs	es, small claims a	Co AAA Court Numl City AAA Court Numl City Sup Cou	urt or agency Arbitration Name Street Arbitration Name	State State	ZIP Code	Status of the case Pending On appeal Concluded Pending On appeal

Document Page 51 of 71 Debtor 1 Kieu Leo Case number (if known) _ First Name Middle Name Last Name 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. ☐ Yes. Fill in the information below. Describe the property Date Value of the property Creditor's Name **Explain what happened** Number Street Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied. City ZIP Code State 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? **√** No Yes. Fill in the details. Describe the action the creditor took Date action was Amount taken Creditor's Name Street Number City State ZIP Code Last 4 digits of account number: XXXX-_______ 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a courtappointed receiver, a custodian, or another official? **√** No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? **✓** No Yes. Fill in the details for each gift.

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	Et a All	1.0. 51	Case number (if know	
		ddle Name Last Name		
Gifts with per perso	h a total value of more tha on	n \$600 Describe the gifts	Dates you gave the gifts	Value
Person to V	Vhom You Gave the Gift			
Number	Street			
City	State Z	IP Code		
Person's r	elationship to you			
☑ No ☑ Yes. Fil	ll in the details for each gif	or contribution.		
	contributions to charities more than \$600	Describe what you contributed	Date you contributed	Value
Compass	ionate Service Society for	Monthly Tithing	2024	\$83.33
Charity			2024	ψ00.00
	ime			
	me			
Charity's Na				
Charity's Na	ookhurst St Street			
Charity's Na 420 S Bro	ookhurst St Street			
Charity's Na 420 S Bro Number Anaheim,	ookhurst St			
Charity's Na 420 S Bro Number Anaheim,	ookhurst St Street CA 92804			
420 S Bro Number Anaheim,	Ookhurst St Street CA 92804 State ZIP Code			
420 S Bro Number Anaheim,	ookhurst St Street CA 92804			
420 S Bro Number Anaheim, City	ookhurst St Street CA 92804 State ZIP Code st Certain Losses		lose anything because of theft f	ire, other disaster, or
420 S Bronumber Anaheim, City Tt 6: Lis	ookhurst St Street CA 92804 State ZIP Code st Certain Losses	pankruptcy or since you filed for bankruptcy, did you	lose anything because of theft, f	ire, other disaster, or
420 S Bro Number Anaheim, City rt 6: Lis . Within 1 mbling?	ookhurst St Street CA 92804 State ZIP Code st Certain Losses		lose anything because of theft, f	ire, other disaster, or
Anaheim, City Tt 6: Lis Within 1 Imbling?	ookhurst St Street CA 92804 State ZIP Code st Certain Losses		lose anything because of theft, f	ire, other disaster, or
420 S Brown Anaheim, City Tt 6: Lis 5. Within 1 ambling? 1 No 1 Yes. Fill Describe	Street CA 92804 State ZIP Code St Certain Losses year before you filed for I	pankruptcy or since you filed for bankruptcy, did you I Describe any insurance coverage for the loss	Date of your loss	ire, other disaster, or Value of property lost
420 S Brown Anaheim, City Tt 6: Lis 5. Within 1 ambling? 1 No 1 Yes. Fil	Street CA 92804 State ZIP Code St Certain Losses year before you filed for I	pankruptcy or since you filed for bankruptcy, did you	Date of your loss	
420 S Brown Anaheim, City Tt 6: Lissis. Within 1 ambling? Yes. Fill Describe	Street CA 92804 State ZIP Code St Certain Losses year before you filed for I	pankruptcy or since you filed for bankruptcy, did you I Describe any insurance coverage for the loss Include the amount that insurance has paid. List pe	Date of your loss	

	Case 24-30	3012-3gj <i>i</i>	7 Doc 1	Document	Paç	ge 53 (25/24 10:51:5	,,	2000 Main
otor 1	Kieu			Leo				Case number (if	know	/n)
	First Name	Middle	Name	Last Name						
art 7: Lis	st Certain Payı	ments or Tr	ansfers							
bout seekinclude any	ing bankruptcy o	r preparing a	bankruptcy p	etition?	_	-		r transfer any prop		to anyone you consulted
			Description a	and value of any	property	transferre	ed	Date payment or		Amount of payment
	Law, PLLC no Was Paid		А					transfer was mad	de	
			Attorney's Fee	es and Costs				2/26/2024		\$4,250.00
	ron Pkwy 303								•	ψ :,200:00
Number	Street									
Lewisville	e, TX 75057									
City	State	ZIP Code								
Email or we	ebsite address									
7. Within 1 elp you de o not inclu	no Made the Paymer 1 year before you eal with your credude any payment of	filed for bank	ake payments	to your creditors		n your be	half pay o	r transfer any prop	erty t	to anyone who promised t
7. Within 1 elp you de to not inclu	1 year before you eal with your cred	filed for bank	ake payments	to your creditors		n your be	half pay o	r transfer any prop	erty t	to anyone who promised t
7. Within 1 elp you de to not inclu	1 year before you eal with your cred ude any payment o	filed for bank	ake payments t you listed on	to your creditors	s?			Date payment or		to anyone who promised t
7. Within 1 elp you de to not inclu No Yes. Fi	1 year before you eal with your cred ude any payment o	filed for bank	ake payments t you listed on	to your creditors line 16.	s?			Date payment or		
7. Within 1 elp you de o not inclu ☑ No □ Yes. F	1 year before you eal with your cred ude any payment of the fill in the details.	filed for bank	ake payments t you listed on	to your creditors line 16.	s?			Date payment or		
7. Within 1 elp you de to not inclu No Yes. Fi	1 year before you eal with your cred ude any payment of the fill in the details.	filed for bank	ake payments t you listed on	to your creditors line 16.	s?			Date payment or		
7. Within 1 elp you de o not inclu Yes. Fi	1 year before you eal with your cred ude any payment of the control of the contro	filed for bank	ake payments t you listed on	to your creditors line 16.	s?			Date payment or		
7. Within 1 elp you de to not inclu M No Yes. Fi	1 year before you eal with your cred ude any payment of the control of the contro	filed for bank	ake payments t you listed on	to your creditors line 16.	s?			Date payment or		
7. Within 1 elp you de to not inclu M No Yes. Fi	1 year before you eal with your cred ude any payment of the control of the contro	filed for bank	ake payments t you listed on	to your creditors line 16.	s?			Date payment or		
7. Within 1 elp you de to not inclu M No Yes. Fi	1 year before you eal with your cred ude any payment of the control of the contro	filed for bank	ake payments t you listed on	to your creditors line 16.	s?			Date payment or		
7. Within 1 elp you de to not inclu Yes. Fi	1 year before you eal with your cred ude any payment of the fill in the details. The Was Paid Street	filed for bank litors or to ma or transfer tha	ake payments t you listed on	to your creditors line 16.	s?			Date payment or		

Document Page 54 of 71 Debtor 1 Kieu Leo Case number (if known). First Name Middle Name Last Name Describe any property or payments Description and value of property Date transfer was transferred received or debts paid in exchange made Person Who Received Transfer Number Street State ZIP Code Person's relationship to you -19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Description and value of the property transferred Date transfer was Name of trust ___ List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. ✓ No Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance instrument closed, sold, moved, or before closing or transferred transfer Name of Financial Institution XXXX--☐ Checking Savings Number Street ☐ Money market Brokerage Other _ City **ZIP Code** State 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? **✓** No Yes. Fill in the details.

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Case 24-30812-sqi7

Doc 1 Filed 03/25/24 Entered 03/25/24 10:51:59 Desc Main Case 24-30812-sgj7 Page 55 of 71 Document Debtor 1 Kieu Leo Case number (if known). First Name Middle Name Last Name Who else had access to it? Describe the contents Do you still have ■ No Name of Financial Institution Name ☐ Yes Number Street Number Street City State **ZIP Code** City State **ZIP Code** 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? **✓** No Yes. Fill in the details. Who else has or had access to it? Describe the contents Do you still have ☐ No Name of Storage Facility Name Yes Street Number Number Street City State **ZIP Code** City State **ZIP Code** Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **✓**No Yes. Fill in the details. Where is the property? Value Describe the property Owner's Name Number Street Number Street City **ZIP Code** City State **ZIP Code**

Case 24-30812-sqi7 Doc 1 Filed 03/25/24 Entered 03/25/24 10:51:59 Desc Main Document Page 56 of 71 Debtor 1 Kieu Leo Case number (if known) _ First Name Middle Name Last Name Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? ✓ No Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Number Street Street City State **ZIP Code** City State **ZIP Code** 25. Have you notified any governmental unit of any release of hazardous material? **✓** No Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State ZIP Code City State **ZIP Code** 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. **✓** No Yes. Fill in the details.

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ebtor 1	Kieu		Leo		Case number (if known)	
	First Name	Middle Name	Last Name			
		Court or a	agency	Nature of the o	case	Status of the case
Case title						Pending
		Court Name	•			☐On appeal
						☐ Concluded
		Number	Street			
Case numb	oer					
		City	State ZIP Code			
art 11: G	live Details Abo	ut Your Business o	r Connections to Any	Business		
27 Within 4	vears before you	filed for hankruntey di	d vou own a business or	have any of the fo	llowing connections to any bus	iness?
	•	•	, profession, or other activ	•		
_			•	•	or part-time	
⊻ A	member of a limite	d liability company (LLC	c) or limited liability partner	rship (LLP)		
□ A	partner in a partner	rship				
√ Ar	n officer, director, o	r managing executive o	f a corporation			
☐ Ar	n owner of at least !	5% of the voting or equi	ity securities of a corporati	on		
_			ty decarrings of a corporati			
		plies. Go to Part 12.				
Yes. C	heck all that apply	above and fill in the det	ails below for each busine	SS.		
Neocad l	194	Describe	e the nature of the busine	ss	Employer Identification number	
Name	JSA	_			Do not include Social Security	number or ITIN.
					EIN: <u>3 5 - 2 7 8 5</u>	8 2 6
610 Old (Campbell Rd 116	Name of	accountant or bookkeep	er	Dates business existed	
Number	Street				From 1/1/2023 To 12/1/	2023
Richards	on, TX 75080				<u></u>	<u></u>
City		ZIP Code				
Neocad l	ISA II C	Describe	e the nature of the busine	ss	Employer Identification number	er
Name	JOA, LLO				Do not include Social Security	number or IIIN.
					EIN:	
610 Old (Campbell Rd 116	Name of	accountant or bookkeep	er	Dates business existed	
Number	Street				From 44/2040 To	
Richards	on, TX 75080-3379				From <u>11/2019</u> To	
City		ZIP Code				
Neocad F	Design LLC	Describe	e the nature of the busine	ss	Employer Identification number	er
Name	Josigii LLO				Do not include Social Security	number or ITIN.
					EIN:	
2134 W E	Buckingham Rd 4	Name of	accountant or bookkeep	er	Dates business existed	
Number	Street				From 11/2010 To 12/20	122
Garland	TX 75042-5096				From <u>11/2019</u> To <u>12/20</u>	<u> </u>
City		ZIP Code				

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			Case number (if known)
	First Name	Middle Name Last Name	
NEOCAD D	Design, Inc	Describe the nature of the busi	iness Employer Identification number Do not include Social Security number or ITIN.
Name			Do not morage coolar occurry number of trive.
			EIN:
1750 n Coll	lins Blvd 100	Name of accountant or bookke	peper Dates business existed
	Street		From 04/2022 To 02/22/2024
Diahandaan	TV 75000 0554		From <u>01/2022</u> To <u>02/23/2024</u>
City	, TX 75080-3551 State	ZIP Code	
	tal Laboratory, In	Describe the nature of the busi	iness Employer Identification number Do not include Social Security number or ITIN.
Name	· · · · · · · · · · · · · · · · · · ·		Do not include occial decurity number of frint.
			EIN:
401 S Sher	man Street 307	Name of accountant or bookke	peper Dates business existed
	Street		
Diahandaan	TV 75004 4000		From <u>11/2018</u> To
City	, TX 75081-4003 State	ZIP Code	
reditors, or o	other parties.		statement to anyone about your business? Include all financial institutions,
Yes. Fill i	in the details belo	ow.	
		Date issued	
Name		MM / DD / YYYY	
		, 22,	
Number S	Street		

City

ZIP Code

State

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Debtor 1	Kieu		Leo	 Case number (if known)
	First Name	Middle Name	Last Name	

Part 12: Sign Below	
I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and and correct. I understand that making a false statement, concealing property, or obtaining bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or	g money or property by fraud in connection with a
/s/ Kieu Leo	
Signature of Kieu Leo, Debtor 1 Date 03/25/2024	
Did you attach additional pages to your Statement of Financial Affairs for Individuals Filin	ng for Bankruptcy (Official Form 107)?
✓No	
Yes	
Did you pay or agree to pay someone who is not an attorney to help you fill out bankrupt	cy forms?
Mo	
Yes. Name of person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this information	n to identify your case	:		
Debtor 1	Kieu		Leo	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankı	ruptcy Court for the:		Northern District of Texas	
Case number (if known)				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

art 1: List You	ır Creditors Who Have Secured Clair	ms	
For any creditor below.	rs that you listed in Part 1 of Schedule D: C	reditors Who Have Claims Secured by Property (Official Form	106D), fill in the information
Identify the cre	ditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name:	Cit Bank Na/Ioancare	☐ Surrender the property.☐ Retain the property and redeem it.	☑ No ☐ Yes
Description of property securing debt:	1818 Warwick St Garland, TX 75044	 ✓ Retain the property and redeem it. ✓ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: 	
Creditor's name: Description of property securing debt:	Austin Bank 1818 Warwick St Garland, TX 75044	 ☐ Surrender the property. ☐ Retain the property and redeem it. ☑ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: 	☑ No ☐ Yes

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btor 1	Kieu		Leo	Case number (if known)
	First Name	Middle Name	Last Name	, ,
t 2: List Yo	our Unexpired	d Personal Property	Leases	
				ontracts and Unexpired Leases (Official Form 106G), fill in the
			of assume it. 11 U.S.C. § 365(p)	till in effect; the lease period has not yet ended. You may assume 2).
Describe you	r unexpired per	sonal property leases		Will the lease be assumed?
Lessor's name:	: Hun	g x Nguyen		□ No
Description of property:		ce Space		√ Yes
_essor's name:				☐ No
				☐ Yes
Description of property:	leased			
essor's name:				☐ No
Description of property:	leased			☐ Yes
_essor's name:	:			☐ No
Description of property:	leased			☐ Yes
_essor's name:				☐ No
Description of property:	leased			☐ Yes
_essor's name:				☐ No
Description of property:	leased			☐ Yes
essor's name:				☐ No
Description of property:	leased			☐ Yes
t 3: Sign B	elow			
		lare that I have indicate	ed my intention about any prope	rty of my estate that secures a debt and any personal
,	-			
/s/ Kieu Led Signature of			_	
2.3.10.010 01				
Date 03/25/	2024			

MM/ DD/ YYYY

Document Page 62 of 71

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Texas

In re	I	Leo, Kieu							
						Case No.			
Debte	or					Chapter	7	<u></u>	
			DISCLOSUR	RE OF COMPEN	NSATION OF A	ATTORNEY F	OR DEBTO)R	
1.	cor	mpensation paid		ear before the filing	of the petition in b	oankruptcy, or a	greed to be pai	amed debtor(s) and that id to me, for services rendere is as follows:	d
	Foi	r legal services,	I have agreed to ac	ccept			<u> </u>	\$4,250.00	
	Pri	or to the filing of	f this statement I ha	ve received			<u> </u>	\$4,250.00	
	Bal	lance Due					<u> </u>	\$0.00	
2.	The	e source of the	compensation paid	to me was:					
	V	Debtor	Other (spec	cify)					
3.	The	e source of com	pensation to be paid	d to me is:					
	V	Debtor	Other (spec	cify)					
4.		I have not agre	eed to share the abo	ove-disclosed comp	pensation with any	other person ur	nless they are i	members and associates of r	ny
		_	to share the above-	· ·		-		t members or associates of ration, is attached.	ny
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:								
	a.	 Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; 							
	b.	Preparation a	and filing of any petit	tion, schedules, sta	tements of affairs	and plan which	may be require	ed;	
	c.	Representation	on of the debtor at the	he meeting of credit	tors and confirmat	ion hearing, and	d any adjourned	d hearings thereof;	
6.	Ву	agreement with	the debtor(s), the a	above-disclosed fee	does not include	the following se	rvices:		

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B2030 (Form 2030) (12/15)

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

03/25/2024 /s/ David Shuster

Date David Shuster

Signature of Attorney

Bar Number: 24037491 Shuster Law, PLLC 860 Hebron Pkwy 303 Lewisville, TX 75057 Phone: (972) 315-6222

Shuster Law, PLLC

Name of law firm

Coco	24 20012 69	7 Dog 1	Filed 02/2E/2	1 Entered O	3/25/24 10:51:59	Desc Main
Fill in this information	to identify your case	:		Ţ.		
Debtor 1	Kieu		Leo			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankro	uptcy Court for the:		Northern District of Te	exas		
Case number (if known)					Check if this is	s an amended filing
Official Form	122A-1Sup	p				
	•	-	m Presumn	tion of Ab	use Under §	707(b)(2) 12/15
	-					hat you are exempted from a
presumption of abuse	. Be as complete and other person should	d accurate as po d complete a se	ossible. If two married	people are filing tog		sions in this statement applies
Part 1. Identify ti	le Killa di Debis	tou nave				
family, or hou 101). ☑ No. Go to	o Form 122A-1; on the supplement with the s	ake sure that you ne top of page 1	of that form, check box	with the answer you	gave at line 16 of the <i>Volun</i>	`
Part 2: Determine	e Whether Milita	ry Service Pro	ovisions Apply to Y	ou		
2. Are you a dis No. Go to	sabled veteran (as d	efined in 38 U.S.	.C. § 3741(1)) ?			
☐Yes. Did		tly while you wer	re on active duty or whil	le you were performi	ng a homeland defense act	ivity?
	No. Go to line 3.	2 0.5.C. § 90 I(1).			
	Yes. Go to Form 122		of page 1 of that form, of with the signed Form 1		s no presumption of abuse,	and sign Part
3. Are you or ha	ave you been a Rese	ervist or membe	r of the National Guard	! ?		
☐No. Com	plete Form 122A-1. I	Do not submit thi	is supplement.			
☐Yes. Were	e you called to active	duty or did you	perform a homeland de	efense activity? 10 U	.S.C. § 101(d)(1); 32 U.S.C	. § 901(1)
□ _{No. C}	omplete Form 122A-	1. Do not submit	t this supplement.			
☐Yes. (Check any one of the	following catego	ories that applies:			
If you checked one of the categories and remain on active duty.						of page 1 of Form 122A-1,
□Iwa	as called to active du	uty after Septem	ber 11, 2001, for at leas	st 90 days	sign Part 3. Then submit th	est does not apply now, and his supplement with the signed
and		active duty on	, which		Official Form 122A-1 during	required to fill out the rest of g the exclusion period. The e time you are on active duty or
			ctivity for at least 90 da	-		d defense activity, and for 540
□lpe			y for at least 90 days,	•		
ban	, which which which which we have a second control with the world with the w	ch is fewer than t	540 days before I file th	IS	you may have to file an am	ds before your case is closed, nended form later

	Caco	<u> </u>	i7 <u>Doc 1</u>	<u> </u>	25/2 <i>1</i> =	ntarad	ひろりつ	<u> </u>	F1-F0 Doce Ma	vin .
Fil		to identify your case					3/2		box only as directed in the	
D	Debtor 1	Kieu		Leo					• •	
		First Name	Middle Name	Last Name				_	e is no presumption of abo	
	Debtor 2								calculation to determine if applies will be made un	
(3	Spouse, if filing)	First Name	Middle Name	Last Name					Test Calculation (Official F	
L	Jnited States Bankri	uptcy Court for the:	N	orthern Distric	ct of Texas				Means Test does not applied military service but it	
	Case number of known)							<u> </u>	<u> </u>	
								☐ Check	f this is an amended filing	J
Of	fficial Form	122A-1								
\sim	hanter 7 9	 Statement	of Your	Curren	t Mont	hlv li	ററ	me		12/19
									being accurate. If more s	
atta and bec with	ach a separate shee I case number (if ki cause of qualifying h this form.	et to this form. Includ nown). If you believe military service, con	de the line number that you are exem nplete and file Stat	to which the a	additional inf presumption (ormation a of abuse b	applies ecause	a. On the top you do not	of any additional pages have primarily consumer § 707(b)(2) (Official Form	, write your name er debts or
		Your Current Mo								
1.		ital and filing status	-							
		Fill out Column A, line our spouse is filing		oth Columns A	and B lines	2 11				
		our spouse is NOT f				2-11.				
	_	he same household	•			olumn A a	nd B, lii	nes 2-11.		
									king this box, you declare	
		nalty of perjury that y re living apart for rea							plies or that you and your 707(b)(7)(B).	
1 v e	01(10A). For example aried during the 6 m	ole, if you are filing on the incor	n September 15, th	ne 6-month per and divide the	riod would be total by 6. Fi	March 1 tl	hrough sult. Do column	August 31. In a not include only. If you I	u file this bankruptcy cas f the amount of your mon any income amount more nave nothing to report for	thly income ethan once. For
							Colu Debt	mn A t or 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wage deductions).	s, salary, tips, bonus	ses, overtime, and	commissions	(before all pa	ayroll				
3.	Alimony and mai is filled in.	ntenance payments	Do not include pag	yments from a	spouse if Co	lumn B				-
4.	your dependents unmarried partner roommates. Include	any source which a , including child sup r, members of your h de regular contributio ents you listed on line	pport. Include regulousehold, your depons from a spouse of	lar contribution pendents, pare	ns from an ents, and	-				-
5.	Net income from or farm	operating a busines	s, profession,	Debtor 1	Debtor 2					
	Gross receipts (be	efore all deductions)								
	Ordinary and nec	essary operating exp	enses							
	Net monthly incor	ne from a business,	profession, or farm			Copy here →				_
6.	Net income from	rental and other rea	l property	Debtor 1	Debtor 2					
	Gross receipts (be	efore all deductions)								
	Ordinary and nec	essary operating exp	enses							
	Net monthly incor	ne from rental or oth	er real property			Copy here →				
7.	Interest, dividend	ls, and royalties				•	_			
	,									

Debtor 1

To find a list of applicable median income amounts, go online using the link specified in the separate

14a. ☐ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse.

14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2.

instructions for this form. This list may also be available at the bankruptcy clerk's office.

Entered 03/25/24 10:51:59 Filed 03/25/24 Page 66 of 71 Case number (if known). Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit For you..... For your spouse..... 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. Total amounts from separate pages, if any. 11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. **Total current** monthly income Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11..... Copy line 11 here Multiply by 12 (the number of months in a year). x 12 12b. The result is your annual income for this part of the form. 12h 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. Fill in the number of people in your household.

14. How do the lines compare?

Go to Part 3 and fill out Form 122A-2.

Filed 03/25/24 Entered 03/25/24 10:51:59 Case 24-30812-sgj7 Doc 1 Debtor 1

Case number (if known)

Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Kieu Leo

Signature of Debtor 1

Date 03/25/2024

MM/ DD/ YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

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IN THE UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS DALLAS DIVISION

IN RE:	Leo, Kieu		CASE NO				
			CHAPTER 7				
		VERI	FICATION OF CREDITOR MATRIX				
The a	above named Debtor	hereby verifies that the attac	ched list of creditors is true and correct to the best of his/her knowledge.				
Date _	03/25/2024	Signature	/s/ Kieu Leo Kieu Leo, Debtor				

Attorney General Of Texas

Bankruptcy Section P.O. BOX 12548 Austin, TX 78711

Attorney General Of Texas

c/o Jason Moody P.O. BOX 12548 Austin, TX 78711

Austin Bank

Attn: Bankruptcy PO Box 951 Jacksonville, TX 75766

Bank of America

Attn: Bankruptcy P.O. BOX 660441 Dallas, TX 75266-0441

Cit Bank Na/loancare

3637 Sentara Way Virginia Beach, VA 23452

Citibank

Citicorp Cr Srvs/Centralized Bankruptcy PO Box 790104 Saint Louis, MO 63179

Credence Resource Management, LLC

Attn: Bankruptcy 4222 Trinity Mills Road Suite 260

Dallas, TX 75287

Department of US Treasury

Attn: Bureau of Fiscal Service

PO Box 830794

Birmingham, AL 35283-0794

Fnb Omaha

Attn: Bankruptcy P.O. Box 3128 Omaha, NE 68103

Forward Financing

Attn: Bankruptcy 53 State Street 20th Floor Boston, MA 02109

Fundkite

Attn: Bankruptcy 2 S Biscayne Blvd 23rd Floor Miami, FL 33131

Gilerman Law

515 Madison Avenue 8108 New York, NY 10022

GoodLeap Llc.

Attn: Bankruptcy 8781 Sierra College Blvd Roseville, CA 95661

Greenwich Capital Attn: Bankruptcy 515 N Flagler Drive 300 West Palm Beach, FL 33401

Hung x Nguyen

Internal Revenue Service 1100 Commerce Street MC 5026 DAL Dallas, TX 75242

Internal Revenue Service

Centralized Insolvency Operations PO Box 7346 Philadelphia, PA 19101-7346

Mantis Funding

Attn: Bankruptcy 2700 N Military Trl 450 Boca Raton, FL 33431

Smart Business

Attn: Bankruptcy 20515 NE 22nd Avenue Miami, FL 33180

Synchrony/PayPal Credit

Attn: Bankruptcy PO Box 965060 Orlando, FL 32896-5060

U.S. Department of Education

400 Maryland Ave Sw Washington, DC 20202-0001

U.S. Trustee

1100 Commerce St Ste 976 Dallas, TX 75242-0996